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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
AMENDMENT TRANSMITTAL LETTER

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 3, 2006.

Sheila R. Slanker

Applicant : Jason R. Babcock, et al.  
Application No. : 10/634,640  
Filed : August 5, 2003  
Title : DECOMPOSITION OF ORGANIC AZIDES

Confirmation No. 7195

Grp./Div. : 1714  
Examiner : Cephia D. Toomer

Docket No. : 50883/U339

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Post Office Box 7068  
Pasadena, CA 91109-7068  
March 3, 2006

Commissioner:

Enclosed is an amendment to the above-identified application.

| CLAIMS AS AMENDED   |   |                               |                           |                      |                      |     |
|---|---|-------------------------------|---------------------------|----------------------|----------------------|-----|
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Paid For | Number<br>Extra<br>Claims | Small Entity<br>Rate | Large Entity<br>Rate | FEE |
| Total Claims Fee  | 32  | *33                           |                           | x \$25.00            | x \$50.00            |     |
| Independent Claims  | 2   | ** 3                          |                           | x \$100.00           | x \$200.00           |     |
| Multiple Dependent<br>Claims ***  |   |                               |                           | \$180.00             | \$360.00             |     |
| TOTAL FILING<br>FEE   |   |                               |                           |                      |                      |     |
| NO ADDITIONAL<br>FEE REQUIRED   | IF NO FEE REQUIRED, INSERT "0"            |                               |                           |                      |                      |     |
| LIST INDEPENDENT CLAIMS:  |   |                               |                           |                      |                      |     |
| * IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3     |   |                               |                           |                      |                      |     |
| ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3      |   |                               |                           |                      |                      |     |
| *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME |   |                               |                           |                      |                      |     |

**Amendment Transmittal Letter**  
**Application No. 10/634,640**


       Attached is our check for \$ to pay the fees calculated above.  
  X   A Petition for Extension of Time and the required fee are enclosed.  
  X   Other enclosures: (1) Information Disclosure Statement with List of Cited  
References and \$180 fee; (2) Exhibits

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. **A copy of this letter is enclosed.**

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

  
John D. Carpenter  
Reg. No. 34,133  
626/795-9900

JDC/srh

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